

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

DISTRICT OF MONTANA

Case number (if known)

Chapter

11☐ Check if this an amended filing

## Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1.	<b>Debtor's name</b>	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b>	
2.	<b>All other names debtor used in the last 8 years</b> <small>Include any assumed names, trade names and doing business as names</small>	<b>Diocese of Great Falls-Billings</b>	
3.	<b>Debtor's federal Employer Identification Number (EIN)</b>	<b>81-0302011</b>	
4.	<b>Debtor's address</b>  <b>Principal place of business</b>  <b>121 23rd Street, South</b> <b>Great Falls, MT 59401</b> <small>Number, Street, City, State &amp; ZIP Code</small>  <b>Cascade</b> <small>County</small>	<b>Mailing address, if different from principal place of business</b>  <b>P.O. Box 1399</b> <b>Great Falls, MT 59403</b> <small>P.O. Box, Number, Street, City, State &amp; ZIP Code</small>  <b>Location of principal assets, if different from principal place of business</b>  <small>Number, Street, City, State &amp; ZIP Code</small>	
5.	<b>Debtor's website (URL)</b>	<b>www.dioceseofgfb.org</b>	
6.	<b>Type of debtor</b>	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify: _____	

Debtor **Roman Catholic Bishop of Great Falls, Montana, a  
Montana Religious Corporate Sole**  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**7. Describe debtor's business** A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Railroad (as defined in 11 U.S.C. § 101(44))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))  
☒ None of the above

B. Check all that apply

- ☒ Tax-exempt entity (as described in 26 U.S.C. §501)  
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)  
☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.  
 See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8131

**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

Check one:

- ☐ Chapter 7  
☐ Chapter 9

☒ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).  
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  
☐ A plan is being filed with this petition.  
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).  
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.  
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.  
☐ Yes.

If more than 2 cases, attach a separate list.

District _____	When _____	Case number _____
District _____	When _____	Case number _____

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**

- ☒ No  
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor _____	Relationship _____
District _____	When _____ Case number, if known _____

Debtor **Roman Catholic Bishop of Great Falls, Montana, a**

Case number (if known)

**Montana Religious Corporate Sole**

Name

**11. Why is the case filed in this district?***Check all that apply:*

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**☒ No☐ Yes.

Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention?** (Check all that apply.)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard?

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other**Where is the property?**

Number, Street, City, State &amp; ZIP Code

**Is the property insured?**☐ No☐ Yes. Insurance agency

Contact name

Phone

**Statistical and administrative information****13. Debtor's estimation of available funds***Check one:*

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

**14. Estimated number of creditors**☐ 1-49☐ 50-99☒ 100-199☐ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☒ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☒ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **Roman Catholic Bishop of Great Falls, Montana, a  
Montana Religious Corporate Sole**  
Name

Case number (if known)

**Request for Relief, Declaration, and Signatures**

**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **March 31, 2017**  
MM / DD / YYYY

**X /s/ Michael W. Warfel**

Signature of authorized representative of debtor

**Michael W. Warfel**

Printed name

Title **Bishop**

**18. Signature of attorney**

**X /s/ Bruce A. Anderson**

Signature of attorney for debtor

Date **March 31, 2017**

MM / DD / YYYY

**Bruce A. Anderson**

Printed name

**Elsaesser Jarzabek Anderson Elliott & Macdonald, Chtd.**

Firm name

**320 East Neider Avenue  
Suite 102**

**Coeur D Alene, ID 83815**

Number, Street, City, State & ZIP Code

Contact phone **(208) 667-2900**

Email address **brucea@ejame.com**

**3392**

Bar number and State

**Fill in this information to identify the case:**Debtor name **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**United States Bankruptcy Court for the: **DISTRICT OF MONTANA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 202

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **March 31, 2017****X /s/ Michael W. Warfel**

Signature of individual signing on behalf of debtor

**Michael W. Warfel**

Printed name

**Bishop**

Position or relationship to debtor

**Fill in this information to identify the case:**Debtor name **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**United States Bankruptcy Court for the: **DISTRICT OF MONTANA**

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
34 Abuse Claimants "Doe Group"	<b>Milt Datsopoulos and Molly Howard Datsopoulos, MacDonald and Lind</b> 201 W Main St, Ste 201 Missoula, MT 59802 (406) 728-0810  <b>Bryan Smith and Vito de la Cruz Tamaki Law Offices</b> 1340 N 16th Ave, Ste C Yakima, WA 98902 (509) 248-8338	<b>Abuse Claims against the Debtor. Claimants names and addresses to be filed under seal, after appropriate motion, notice and hearing allowing sealing and confidentiality of identities of claimants</b>	Unliquidated			Unknown

Debtor **Roman Catholic Bishop of Great Falls, Montana, a  
Montana Religious Corporate Sole**  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
<b>38 Abuse Claimants "Becker Group"</b>	<p><b>Milt Datsopoulos and Molly Howard Datsopoulos, MacDonald and Lind</b> 201 W Main St, Ste 201 Missoula, MT 59802 (406) 728-0810</p> <p><b>Timothy Kosnoff</b> Kosnoff Law Metro Office Park, Metro Park 7 Street 1, Ste 204 Guyanabo San Juan, Puerto Rico 0096br (425) 830-8201</p> <p><b>Daniel Fasy</b> Fasy Law 1752 NW Market St, #1502 Seattle, WA 98107 (206) 450-0175</p> <p><b>Joseph Blumel III</b> Law Offices of Joseph Blumel III 4407 N Division St, Ste 900 Spokane, WA 99207 (509) 487-1651</p> <p><b>Lee James and Craig Vernon</b> James, Vernon and Weeks 1626 Lincoln Way Coeur d'Alene, ID 83814 (208) 667-0683</p>	<b>Abuse Claims against the Debtor. Claimants names and addresses to be filed under seal, after appropriate motion, notice and hearing allowing sealing and confidentiality of identities of claimants</b>	<b>Unliquidated</b>			<b>Unknown</b>

## Fill in this information to identify the case:

Debtor name **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**

United States Bankruptcy Court for the: DISTRICT OF MONTANA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206Sum

### Summary of Assets and Liabilities for Non-Individuals

12/15

#### Part 1: Summary of Assets

##### 1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

<b>1a. Real property:</b>	
Copy line 88 from <i>Schedule A/B</i> .....	\$ <b>13,792,283.00</b>
<b>1b. Total personal property:</b>	
Copy line 91A from <i>Schedule A/B</i> .....	\$ <b>6,958,909.11</b>
<b>1c. Total of all property:</b>	
Copy line 92 from <i>Schedule A/B</i> .....	\$ <b>20,751,192.11</b>

#### Part 2: Summary of Liabilities

<b>2. Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D)	
Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <b>0.00</b>
<b>3. Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
<b>3a. Total claim amounts of priority unsecured claims:</b>	
Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <b>0.00</b>
<b>3b. Total amount of claims of nonpriority amount of unsecured claims:</b>	
Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <b>14,785,516.48</b>
<b>4. Total liabilities</b> .....	
Lines 2 + 3a + 3b	\$ <b>14,785,516.48</b>



**Fill in this information to identify the case:**

Debtor name **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**

United States Bankruptcy Court for the: **DISTRICT OF MONTANA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor**

**Current value of debtor's interest**

**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **U.S. Bank**

**RCB Operating Checking Account**

**3789**

**\$205,954.60**

3.2. **U.S. Bank**

**Payroll Checking Account**

**8267**

**\$9,723.16**

3.3. **U.S. Bank**

**Online Giving Checking Account**

**1462**

**\$300.00**

3.4. **First Interstate Bank**

**Diocese of Great Falls-Billings Merchant Account**

**8305**

**\$12,258.01**

Debtor **Roman Catholic Bishop of Great Falls, Montana, a  
Montana Religious Corporate Sole**  
Name

Case number (If known)

**See Exhibit 1**

The Debtor is civilly incorporated as the "Roman Catholic Bishop of Great Falls, Montana, a Montana religious corporation sole" (RCB). At the same time, the Code of Canon Law of the Roman Catholic Church requires that each entity within the Diocese (e.g., parish, institution) is a separate entity within the Church. The Debtor may have title to property which is held for the benefit of those separate entities. Therefore, except as otherwise stated, the property listed on the attached list is held for the benefit of the parishes and institutions of the Diocese, and is not property of the estate.

3.5.	Total value of such bank accounts is <b>\$2,508,089.29</b>	See Exhibit 1	<b>\$0.00</b>
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3.6.	U.S. Bank Great Falls Central HS Operations Account	Checking - historically designated for high school only	<b>\$23,179.99</b>
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3.7.	U.S. Bank Great Falls Central Catholic HS Donation Account	Checking - historically designated for high school only	<b>\$160,944.69</b>
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4. **Other cash equivalents (Identify all)**

4.1.	RCB Cash	<b>\$0.00</b>
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4.2.	Great Falls Central Catholic HS Cash	<b>\$182.33</b>
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5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

<b>\$412,542.78</b>
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**Part 2: Deposits and Prepayments**

6. **Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.  
☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**  
Description, including name of holder of deposit

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**  
Description, including name of holder of prepayment

8.1.	Pre-Paid Postage - USPO Great Falls	<b>\$430.95</b>
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Debtor **Roman Catholic Bishop of Great Falls, Montana, a  
Montana Religious Corporate Sole**  
Name

Case number (If known)

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$430.95**

**Part 3: Accounts receivable**

10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.  
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less:	<u>1,254,730.98</u>	-	<u>225,714.52</u>	= ....	<u>\$1,029,016.46</u>
	face amount		doubtful or uncollectible accounts		

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**\$1,029,016.46**

**Part 4: Investments**

13. **Does the debtor own any investments?**

- ☐ No. Go to Part 5.  
☒ Yes Fill in the information below.

14. **Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

**U.S. Bank Trust - Stocks  
Permanently Restricted Fund - Seminary Burse Fund  
and Cemetery Perpetual Care Funds (2)**

14.1.		<b>\$2,096,258.06</b>
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14.2.	<b>Melon Investment Servicing - CSI and MFS Stock Unrestricted</b>	<b>\$14,755.04</b>
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The Debtor is civilly incorporated as the "Roman Catholic Bishop of Great Falls, Montana, a Montana religious corporation sole" (RCB). At the same time, the Code of Canon Law of the Roman Catholic Church requires that each entity within the Diocese (e.g., parish, institution) is a separate entity within the Church. The Debtor may have title to property which is held for the benefit of those separate entities. Therefore, except as otherwise stated, the property listed on the attached list is held for the benefit of the parishes and institutions of the Diocese, and is not property of the estate. See Exhibit 3

14.3.	<b>Total value of such investment accounts is \$15,004,708.59</b>	<b>\$0.00</b>
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15. **Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b>	Case number (If known)
	Name	

  

	Name of entity:	% of ownership	
	<b>Catholic Mutual Umbrella Pool II</b>		
	<b>Shared equity position in Umbrella Pool -</b>		
15.1.	<b>illiquid</b>	%	<b>\$171,578.00</b>

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16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**  
Describe:

	RCB from Estate of Jacquelyn Swan - Series EE US Savings Bonds	
16.1.	<b>Unrestricted</b>	<b>\$13,785.98</b>

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	U.S. Bank Trust - Bonds Permanently Restricted Fund - Seminary Burse Fund and Cemetery Perpetual Care Funds (2)	
16.2.		<b>\$1,001,048.20</b>

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	Darrell and Sharon Schamp Annuity FBO Roman Catholic Bishop Prudential Strategic Partners Annuity Trust FBO Great Falls Catholic Central HS Current Present Value -0-	
16.3.		<b>\$0.00</b>

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17.	Total of Part 4.	<b>\$3,297,425.28</b>
	Add lines 14 through 16. Copy the total to line 83.	

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
- ☐ Yes Fill in the information below.

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
- ☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. <b>Office furniture Great Falls Central Catholic High School Furniture and Fixtures - See Exhibit 4</b>	<b>\$0.00</b>	<b>Depreciated</b>	<b>\$100,933.67</b>

40. **Office fixtures**

Debtor **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole** Case number (If known)

Name

<b>Mount Olivet Cemetery Equipment - See Exhibit 4</b>	<b>\$0.00</b>	<b>Depreciated</b>	<b>\$7,473.10</b>
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41. <b>Office equipment, including all computer equipment and communication systems equipment and software</b> <b>RCB Furniture and Fixtures - See Exhibit 4</b>	<b>\$0.00</b>	<b>Depreciated</b>	<b>\$66,382.15</b>
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<b>Holy Cross Cemetery Equipment - See Exhibit 4</b>	<b>\$0.00</b>	<b>Depreciated</b>	<b>\$23,808.80</b>
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42. <b>Collectibles</b> <i>Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles</i>			
42.1. <b>Misc. RCB collectible items</b>	<b>\$0.00</b>	<b>Estimated</b>	<b>\$5,000.00</b>

43. <b>Total of Part 7.</b> Add lines 39 through 42. Copy the total to line 86.			<b>\$203,597.72</b>
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44. **Is a depreciation schedule available for any of the property listed in Part 7?**  
☐ No  
☒ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**  
☒ No  
☐ Yes

**Part 8: Machinery, equipment, and vehicles**

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.  
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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47. <b>Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles</b>			
47.1. <b>See Exhibit 5</b>	<b>\$0.00</b>	<b>Depreciated</b>	<b>\$153,029.92</b>

48. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

51. <b>Total of Part 8.</b> Add lines 47 through 50. Copy the total to line 87.			<b>\$153,029.92</b>
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52. **Is a depreciation schedule available for any of the property listed in Part 8?**  
☐ No

Debtor **Roman Catholic Bishop of Great Falls, Montana, a  
Montana Religious Corporate Sole**

Case number *(If known)*

Name

☒ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No

☐ Yes

**Part 9: Real property**

54. **Does the debtor own or lease any real property?**

☐ No. Go to Part 10.

☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

**Description and location of property**

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.

**Nature and extent of debtor's interest in property**

**Net book value of debtor's interest**  
(Where available)

**Valuation method used for current value**

**Current value of debtor's interest**

Debtor **Roman Catholic Bishop of Great Falls, Montana, a  
Montana Religious Corporate Sole**  
Name

Case number (If known)

55.1. The Debtor is civilly incorporated as the "Roman Catholic Bishop of Great Falls, Montana, a Montana religious sole." At the same time, the Code of Canon Law of the Roman Catholic Church requires that each entity within the Diocese (e.g., parish, institution) is a separate entity within the Church. The Debtor may have title to property which is held for the benefit of those separate entities. Therefore, except as otherwise stated, the property listed on the attached schedule is held for the benefit of the parishes and institutions of the Diocese, and is not property of the estate.

In all cases and unless otherwise noted real properties were valued at tax assessed value, or based on the tax assessed value of comparable properties.

Properties shown on attached Exhibit 7:  
Total value of such properties  
**\$70,922,622.00**

**\$0.00**

**\$0.00**

55.2. Real Property held by  
Diocese of Great  
Falls - See Exhibit 6

See Exhibit 6

**\$0.00**

**\$13,792,283.00**

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.  
Copy the total to line 88.

**\$13,792,283.00**

57. Is a depreciation schedule available for any of the property listed in Part 9?

☒ No

☐ Yes

Debtor **Roman Catholic Bishop of Great Falls, Montana, a  
Montana Religious Corporate Sole**  
Name

Case number (If known)

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

☐ No

☒ Yes

**Part 10: Intangibles and intellectual property**

59. Does the debtor have any interests in intangibles or intellectual property?

☐ No. Go to Part 11.

☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites www.diocesegfb.org www.saintthomascamp.com	\$0.00		\$0.00

62. Licenses, franchises, and royalties

63. Customer lists, mailing lists, or other compilations

64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?)

☒ No

☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

☒ No

☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

☒ No

☐ Yes

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.

☒ Yes Fill in the information below.

Current value of debtor's interest

71. Notes receivable  
Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)  
Description (for example, federal, state, local)

73. Interests in insurance policies or annuities



Debtor **Roman Catholic Bishop of Great Falls, Montana, a  
Montana Religious Corporate Sole**  
Name

Case number (If known)

**Margaret Meissner Life Insurance Policy fbo RBC, No  
Present Interest**

**Unknown**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**
75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**
76. **Trusts, equitable or future interests in property**
77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

**Mineral Interests, See Exhibit 8**

**\$0.00**

**Unexpired Leases - See Exhibit 9**

**\$0.00**

**Assets Held by Catholic Foundation of Eastern Montana  
(CFEM) for RCB, See Exhibit 10**

**\$1,862,866.00**

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

**\$1,862,866.00**

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

☒ No

☐ Yes

Debtor **Roman Catholic Bishop of Great Falls, Montana, a  
Montana Religious Corporate Sole**  
Name

Case number (If known)

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<u>\$412,542.78</u>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<u>\$430.95</u>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<u>\$1,029,016.46</u>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<u>\$3,297,425.28</u>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<u>\$203,597.72</u>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<u>\$153,029.92</u>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<u>\$13,792,283.00</u>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<u>+</u> <u>\$1,862,866.00</u>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<u>\$6,958,909.11</u>	+ 91b. <u>\$13,792,283.00</u>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<u>\$20,751,192.11</u>

**Fill in this information to identify the case:**

Debtor name **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**

United States Bankruptcy Court for the: **DISTRICT OF MONTANA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206D**

**Schedule D: Creditors Who Have Claims Secured by Property**

**12/15**

**Be as complete and accurate as possible.**

**1. Do any creditors have claims secured by debtor's property?**

☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☐ Yes. Fill in all of the information below.

**Fill in this information to identify the case:**

Debtor name **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**

United States Bankruptcy Court for the: **DISTRICT OF MONTANA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	<p>Nonpriority creditor's name and mailing address</p> <p><b>34 Abuse Claimants "Doe Group"</b>  <b>Bryan Smith and Vito de la Cruz</b>  <b>Tamaki Law Offices</b>  <b>1340 N. 16th Avenue, Suite C</b>  <b>Yakima, WA 98902</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Abuse Claims against the Debtor. Claimants names and addresses to be filed under seal, after appropriate motion, notice and hearing allowing sealing and confidentiality of identities of claimants.</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.2	<p>Nonpriority creditor's name and mailing address</p> <p><b>38 Abuse Claimants "Becker Group"</b>  <b>Timothy Kosnoff, Kosnoff Law</b>  <b>Metro Office Park, Metro Park 7</b>  <b>Street 1, Suite 204 Guyanabo</b>  <b>San Juan, PR 00968</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>Abuse Claims against the Debtor. Claimants names and addresses to be filed under seal, after appropriate motion, notice and hearing allowing sealing and confidentiality of identities of claimants.</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>
3.3	<p>Nonpriority creditor's name and mailing address</p> <p><b>Blessed Sacrament Parish</b>  <b>630 Cheyenne Ave</b>  <b>Lame Deer, MT 59043</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>CASC/DLF Interest</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<b>Unknown</b>

Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.4	Nonpriority creditor's name and mailing address <b>Catholic Foundation of Eastern MT</b> <b>P.O. Box 1345</b> <b>Great Falls, MT 59403-1345</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>Unpaid Invoices and Other</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.5	Nonpriority creditor's name and mailing address <b>Christ the King</b> <b>13268 S 5TH St</b> <b>Busby, MT 59016</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.6	Nonpriority creditor's name and mailing address <b>Corpus Christi Parish</b> <b>410 22nd Ave NE</b> <b>Great Falls, MT 59404</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.7	Nonpriority creditor's name and mailing address <b>General Unsecured Creditors</b> <b>All in Care-Diocese of Great Falls</b> <b>121 23rd St S</b> <b>Great Falls, MT 59401</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>Unpaid Wages, Commissions or Salaries, Other, see Exhibit 11</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$14,785,516.48</b>
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3.8	Nonpriority creditor's name and mailing address <b>Holy Family</b> <b>530 Main St</b> <b>Winifred, MT 59489</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.9	Nonpriority creditor's name and mailing address <b>Holy Family</b> <b>102 1st Ave N</b> <b>Glentana, MT 59240</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.10	Nonpriority creditor's name and mailing address <b>Holy Spirit Church</b> <b>201 44th St S</b> <b>Great Falls, MT 59405</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.11	Nonpriority creditor's name and mailing address <b>Holy Trinity Church</b> <b>692 Stockett Rd</b> <b>Centerville, MT 59480</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.12	Nonpriority creditor's name and mailing address <b>Immaculate Conception Parish</b> <b>513 Dawson St</b> <b>Wolf Point, MT 59201</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.13	Nonpriority creditor's name and mailing address <b>Immaculate Conception Parish</b> <b>509 N 12th Ave</b> <b>Forsyth, MT 59327</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.14	Nonpriority creditor's name and mailing address <b>Immaculate Conception Parish</b> <b>1223 16th St</b> <b>Fort Benton, MT 59442</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.15	Nonpriority creditor's name and mailing address <b>Mary Queen of Peace</b> <b>3411 S 34th St</b> <b>Billings, MT 59101</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.16	Nonpriority creditor's name and mailing address <b>Our Lady of Loretto Parish</b> <b>11723 E Helen St</b> <b>Lodge Grass, MT 59050</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.17	Nonpriority creditor's name and mailing address <b>Our Lady of Lourdes</b> <b>409 13th St S</b> <b>Great Falls, MT 59405</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.18	Nonpriority creditor's name and mailing address <b>Our Lady of Lourdes Parish</b> <b>105 F St W</b> <b>Poplar, MT 59255</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.19	Nonpriority creditor's name and mailing address <b>Our Lady Of Mercy Mission</b> <b>121 6th Ave W</b> <b>Melstone, MT 59054</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.20	Nonpriority creditor's name and mailing address <b>Our Lady of Ransom</b> <b>201 2nd St</b> <b>Hingham, MT 59528</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.21	Nonpriority creditor's name and mailing address <b>Queen of the Angels</b> <b>206 Hobart</b> <b>Nashua, MT 59248</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.22	Nonpriority creditor's name and mailing address <b>Sacred Heart</b> <b>P.O. Box 236</b> <b>Fort Belknap, MT 59526</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.23	Nonpriority creditor's name and mailing address <b>Sacred Heart Mission</b> <b>22 2nd St NW</b> <b>Cascade, MT 59421</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.24	Nonpriority creditor's name and mailing address <b>Sacred Heart Mission</b> <b>314 Clinton St</b> <b>Bainville, MT 59212</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.25	Nonpriority creditor's name and mailing address <b>Sacred Heart Mission</b> <b>630 Main Ave</b> <b>Inverness, MT 59530</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.26	Nonpriority creditor's name and mailing address <b>Sacred Heart Mission</b> <b>100 2nd Ave E</b> <b>Hobson, MT 59452</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.27	Nonpriority creditor's name and mailing address <b>Sacred Heart Mission</b> <b>225 2nd Ave E</b> <b>Dodson, MT 59524</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.28	Nonpriority creditor's name and mailing address <b>Sacred Heart Parish</b> <b>209 S 4th St</b> <b>Bridger, MT 59014</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.29	Nonpriority creditor's name and mailing address <b>Sacred Heart Parish</b> <b>120 N Montana Ave</b> <b>Miles City, MT 59301</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.30	Nonpriority creditor's name and mailing address <b>Sacred Heart Parish</b> <b>316 W Benham St</b> <b>Glendive, MT 59330</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.31	Nonpriority creditor's name and mailing address <b>Sacred Heart Parish</b> <b>302 S McDonald Ave</b> <b>Terry, MT 59349</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.32	Nonpriority creditor's name and mailing address <b>Saint Kateri Tekakwitha</b> <b>41546 Mondel Ave</b> <b>Wyola, MT 59089</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.33	Nonpriority creditor's name and mailing address <b>SS Cyril and Methodius</b> <b>16 South Corner Rd</b> <b>Ballantine, MT 59006</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.34	Nonpriority creditor's name and mailing address <b>St Aloysius Parish</b> <b>112 W Main St</b> <b>Winnett, MT 59087</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.35	Nonpriority creditor's name and mailing address <b>St David Parish</b> <b>225 N Wilber St</b> <b>Broadus, MT 59317</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.36	Nonpriority creditor's name and mailing address <b>St Francis De Sales Mission</b> <b>301 S Main St</b> <b>Richey, MT 59259</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.37	Nonpriority creditor's name and mailing address <b>St Francis Of Assisi Parish</b> <b>500 Wilson Ave</b> <b>Saco, MT 59261</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.38	Nonpriority creditor's name and mailing address <b>St John The Evangelist Parish</b> <b>210 W Center Ave</b> <b>Baker, MT 59313</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.39	Nonpriority creditor's name and mailing address <b>St Margaret Parish</b> <b>623 Brewster St</b> <b>Geraldine, MT 59446</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.40	Nonpriority creditor's name and mailing address <b>St Mary Parish</b> <b>101 S 7th St W</b> <b>Malta, MT 59538</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.41	Nonpriority creditor's name and mailing address <b>St Mathias Parish</b> <b>310 2nd St NE</b> <b>Moore, MT 59464</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.42	Nonpriority creditor's name and mailing address <b>St Philip Bonitus Parish</b> <b>404 Timmons St</b> <b>Scobey, MT 59263</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.43	Nonpriority creditor's name and mailing address <b>St. Agnes Parish</b> <b>1 N Word Ave</b> <b>Red Lodge, MT 59068</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.44	Nonpriority creditor's name and mailing address <b>St. Albert</b> <b>304 Minnesota</b> <b>Hinsdale, MT 59241</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.45	Nonpriority creditor's name and mailing address <b>St. Ann Cathedral</b> <b>715 3rd Ave N</b> <b>Great Falls, MT 59401</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.46	Nonpriority creditor's name and mailing address <b>St. Ann Mission</b> <b>13327 Mt Highway 200</b> <b>Fort Shaw, MT 59443</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.47	Nonpriority creditor's name and mailing address <b>St. Ann Mission</b> <b>102 Shell St</b> <b>Vida, MT 59274</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.48	Nonpriority creditor's name and mailing address <b>St. Anthony Catholic Church</b> <b>235 Main St E</b> <b>Box Elder, MT 59521</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.49	Nonpriority creditor's name and mailing address <b>St. Anthony Mission</b> <b>1100 Main St</b> <b>Denton, MT 59430</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.50	Nonpriority creditor's name and mailing address <b>St. Anthony Parish</b> <b>413 3rd Ave W</b> <b>Culbertson, MT 59218</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.51	Nonpriority creditor's name and mailing address <b>St. Anthony Parish</b> <b>700 Third Ave</b> <b>Laurel, MT 59044</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.52	Nonpriority creditor's name and mailing address <b>St. Benedict Parish</b> <b>503 Main St</b> <b>Roundup, MT 59072</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.53	Nonpriority creditor's name and mailing address <b>St. Bernard Mission</b> <b>301 Road 148</b> <b>Charlie Creek, MT 59270</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.54	Nonpriority creditor's name and mailing address <b>St. Bernard's Parish</b> <b>226 Wicks Lane</b> <b>Billings, MT 59105</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.55	Nonpriority creditor's name and mailing address <b>St. Catherine Mission</b> <b>317 7th St W</b> <b>Fairview, MT 59221</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.56	Nonpriority creditor's name and mailing address <b>St. Charles Borromeo Mission</b> <b>21228 S Pryor Gap Road</b> <b>Pryor, MT 59066</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.57	Nonpriority creditor's name and mailing address <b>St. Cyril Parish</b> <b>100 Hill Ave</b> <b>Geyser, MT 59447</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.58	Nonpriority creditor's name and mailing address <b>St. Dennis Parish</b> <b>76 Highway 1</b> <b>Crow Agency, MT 59022</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.59	Nonpriority creditor's name and mailing address <b>St. Francis Xavier Parish</b> <b>1100 C Ave</b> <b>Circle, MT 59215</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.60	Nonpriority creditor's name and mailing address <b>St. Gabriel Parish</b> <b>404 8th St W</b> <b>Chinook, MT 59523</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.61	Nonpriority creditor's name and mailing address <b>St. Honorata Mission</b> <b>22 3rd Ave</b> <b>Musselshell, MT 59059</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.62	Nonpriority creditor's name and mailing address <b>St. Joan of Arc Parish</b> <b>100 Church Ave</b> <b>Ekalaka, MT 59324</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.63	Nonpriority creditor's name and mailing address <b>St. John Church</b> <b>404 W Central St</b> <b>Joliet, MT 59041</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.64	Nonpriority creditor's name and mailing address <b>St. John the Baptist</b> <b>412 Leavitt Ave</b> <b>Jordan, MT 59337</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.65	Nonpriority creditor's name and mailing address <b>St. Joseph</b> <b>206 Orchard Ave</b> <b>Hysham, MT 59038</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.66	Nonpriority creditor's name and mailing address <b>St. Joseph</b> <b>331 Moccasin</b> <b>Frazer, MT 59225</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.67	Nonpriority creditor's name and mailing address <b>St. Joseph Mission</b> <b>202 N Montana St</b> <b>Fromberg, MT 59029</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.68	Nonpriority creditor's name and mailing address <b>St. Joseph Parish</b> <b>716 N Custer Ave</b> <b>Hardin, MT 59034</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.69	Nonpriority creditor's name and mailing address <b>St. Joseph Parish</b> <b>301 N Main St</b> <b>Plentywood, MT 59254</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.70	Nonpriority creditor's name and mailing address <b>St. Joseph Parish</b> <b>910 McLeod St</b> <b>Big Timber, MT 59011</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.71	Nonpriority creditor's name and mailing address <b>St. Jude Thaddeus Parish</b> <b>624 4th St</b> <b>Havre, MT 59501</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.72	Nonpriority creditor's name and mailing address <b>St. Labre Parish</b> <b>Tongue River Road</b> <b>Ashland, MT 59003</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.73	Nonpriority creditor's name and mailing address <b>St. Leo the Great Parish</b> <b>102 W Broadway St</b> <b>Lewistown, MT 59457</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.74	Nonpriority creditor's name and mailing address <b>St. Margaret Mary Parish</b> <b>400 Johannes</b> <b>Big Sandy, MT 59520</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.75	Nonpriority creditor's name and mailing address <b>St. Margaret Mary Parish</b> <b>320 Water Ave</b> <b>Colstrip, MT 59323</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.76	Nonpriority creditor's name and mailing address <b>St. Margaret Parish</b> <b>206 1st Ave N</b> <b>Clyde Park, MT 59018</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.77	Nonpriority creditor's name and mailing address <b>St. Mark Parish</b> <b>128 Castner St</b> <b>Belt, MT 59412</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.78	Nonpriority creditor's name and mailing address <b>St. Mary</b> <b>212 4th Ave</b> <b>Custer, MT 59024</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.79	Nonpriority creditor's name and mailing address <b>St. Mary Catholic Church</b> <b>11 W Quincy Ave</b> <b>Chester, MT 59522</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.80	Nonpriority creditor's name and mailing address <b>St. Mary Mission</b> <b>100 Main St</b> <b>Raynesford, MT 59469</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CASC/DLF Interest</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.81	Nonpriority creditor's name and mailing address <b>St. Mary Parish</b> <b>511 S F St</b> <b>Livingston, MT 59047</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.82	Nonpriority creditor's name and mailing address <b>St. Mary Parish</b> <b>240 N Fourth St</b> <b>Columbus, MT 59019</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.83	Nonpriority creditor's name and mailing address <b>St. Mathias</b> <b>305 Kemp St</b> <b>Ryegate, MT 59074</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.84	Nonpriority creditor's name and mailing address <b>St. Matthew Parish</b> <b>219 7th St SE</b> <b>Sidney, MT 59270-5034</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.85	Nonpriority creditor's name and mailing address <b>St. Michael</b> <b>307 S Woodard St</b> <b>Absarokee, MT 59001</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.86	Nonpriority creditor's name and mailing address <b>St. Michael Mission</b> <b>120 2nd Ave</b> <b>Savage, MT 59262</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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3.87	Nonpriority creditor's name and mailing address <b>St. Patrick</b> <b>401 Main St</b> <b>Medicine Lake, MT 59247</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
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Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.88	Nonpriority creditor's name and mailing address <b>St. Patrick Co Cathedral</b> <b>215 N 31st</b> <b>Billings, MT 59101</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.89	Nonpriority creditor's name and mailing address <b>St. Paul Indian Mission</b> <b>#1 Mission Dr</b> <b>Hays, MT 59527</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.90	Nonpriority creditor's name and mailing address <b>St. Peter</b> <b>312 W 1st Ave S</b> <b>Wibaux, MT 59353</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.91	Nonpriority creditor's name and mailing address <b>St. Philip</b> <b>61 Lamesteer Rd</b> <b>Wibaux, MT 59353</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.92	Nonpriority creditor's name and mailing address <b>St. Pius X Catholic Church</b> <b>717 18th St W</b> <b>Billings, MT 59102</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.93	Nonpriority creditor's name and mailing address <b>St. Raphael Parish</b> <b>412 3rd Ave N</b> <b>Glasgow, MT 59230</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.94	Nonpriority creditor's name and mailing address <b>St. Rose of Lima Church</b> <b>101 4th St W</b> <b>Stanford, MT 59479</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	<b>Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole</b> Name _____	Case number (if known) _____
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3.95	Nonpriority creditor's name and mailing address <b>St. Theresa Mission</b> <b>212 N Main St</b> <b>Lambert, MT 59243</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.96	Nonpriority creditor's name and mailing address <b>St. Theresa of the Little Flower</b> <b>16638 Iowa</b> <b>Broadview, MT 59015</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.97	Nonpriority creditor's name and mailing address <b>St. Thomas Aquinas</b> <b>10610 Wing Rd</b> <b>Hogeland, MT 59529</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.98	Nonpriority creditor's name and mailing address <b>St. Thomas Mission</b> <b>201 W Conser Ave</b> <b>Plevna, MT 59344</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.99	Nonpriority creditor's name and mailing address <b>St. Thomas Mission</b> <b>3022 BIA Road 173</b> <b>Brockton, MT 59213</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.100	Nonpriority creditor's name and mailing address <b>St. Thomas the Apostle</b> <b>210 1st Ave SE</b> <b>Harlem, MT 59526</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.101	Nonpriority creditor's name and mailing address <b>St. Thomas The Apostle</b> <b>2055 Woody Dr</b> <b>Billings, MT 59102</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u><b>CASC/DLF Interest</b></u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Roman Catholic Bishop of Great Falls, Montana, a  
Montana Religious Corporate Sole**  
Name

Case number (if known)

3.102 Nonpriority creditor's name and mailing address

**St. William Mission  
705 Scott St W  
Gardiner, MT 59030**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **CASC/DLF Interest**

Is the claim subject to offset? ☒ No ☐ Yes

**Unknown**

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Daniel Fasy Fasy Law 1752 NW Market St, #1502 Seattle, WA 98107</b>	Line <b>3.2</b> <input type="checkbox"/> Not listed. Explain	—
4.2	<b>Joseph Blumel III Law Offices of Joseph Blumel III 4407 N Division Street, Ste 900 Spokane, WA 99207</b>	Line <b>3.2</b> <input type="checkbox"/> Not listed. Explain	—
4.3	<b>Lee James and Craig Vernon James, Vernon and Weeks 1626 Lincoln Way Coeur D Alene, ID 83814</b>	Line <b>3.2</b> <input type="checkbox"/> Not listed. Explain	—
4.4	<b>Milt Datsopoulos and Molly Howard Datsopoulos, MacDonald &amp; Lind 201 W. Main Street Suite 201 Missoula, MT 59802</b>	Line <b>3.1</b> <input type="checkbox"/> Not listed. Explain	—
4.5	<b>Milt Datsopoulos and Molly Howard Datsopoulos, MacDonald &amp; Lind 201 W. Main Street Suite 201 Missoula, MT 59802</b>	Line <b>3.2</b> <input type="checkbox"/> Not listed. Explain	—

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <b>0.00</b>
5b. +	\$ <b>14,785,516.48</b>
5c.	\$ <b>14,785,516.48</b>

**Fill in this information to identify the case:**

Debtor name **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**

United States Bankruptcy Court for the: DISTRICT OF MONTANA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

**1. Does the debtor have any executory contracts or unexpired leases?**

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

**2. List all contracts and unexpired leases**

**State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1. State what the contract or lease is for and the nature of the debtor's interest **Cleaning Equipment**

State the term remaining **33 months**

List the contract number of any government contract \_\_\_\_\_

**First Lease, Inc.  
1 Walnut Grove Dr  
Suite 300  
Horsham, PA 19044**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Toshiba ES 307 with Finisher and Stand for Central Catholic High School**

State the term remaining **36 months**

List the contract number of any government contract \_\_\_\_\_

**Marlin Leasing Corporation  
300 Fellowship Rd  
Mount Laurel, NJ 08054**

2.3. State what the contract or lease is for and the nature of the debtor's interest **See Exhibit 9**

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**Various Unexpired Leases  
See Exhibit 9**

**Fill in this information to identify the case:**

Debtor name **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**

United States Bankruptcy Court for the: DISTRICT OF MONTANA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

### 1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
☐ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

*Column 1: Codebtor*

*Column 2: Creditor*

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	_____	Street _____ City State Zip Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

**Fill in this information to identify the case:**Debtor name **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**United States Bankruptcy Court for the: **DISTRICT OF MONTANA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☒ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****Sources of revenue**  
Check all that apply**Gross revenue**  
(before deductions and exclusions)**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None.**Description of sources of revenue****Gross revenue from each source**  
(before deductions and exclusions)**For prior year:**From **1/01/2016** to **12/31/2016****Fiscal Year from 7/1/15 to 6/30/16 Contributions, Parishes, Etc.****\$6,281,641.00****For year before that:**From **1/01/2015** to **12/31/2015****Fiscal Year from 7/1/14 to 6/30/15 Contributions, Parishes, Etc.****\$9,416,096.00****Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer**  
*Check all that apply*3.1. **Various Payments**  
**See Exhibit 12****\$5,781,438.42**

- ☐ Secured debt
- ☐ Unsecured loan repayments
- ☐ Suppliers or vendors
- ☐ Services
- ☐ Other \_\_\_\_\_

Debtor **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**

Case number (if known)

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Various Parishes See Exhibit 13	Various - See Exhibit 13	\$18,899,779.64	

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Susan Shannon vs. Holy Spirit Catholic School, et al. BDV-13-241	Civil - Discrimination	Montana Eighth Judicial Dist, Cascade Co 415 2nd Ave North Great Falls, MT 59401	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Wilcox v. DGFB, et al. DV 16-1309	Civil - Accident	Montana Thirteenth District Court 217 N 27th St Billings, MT 59107	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3.	Kelly Parks v. Holy Spirit Catholic School	Civil - Discrimination	Montana Human Rights Bureau P.O. Box 1728 Helena, MT 59624	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.4.	Tilton v. RCB	Wrongful Discharge - Discrimination	Montana Human Rights Bureau P.O. Box 1728 Helena, MT 59624	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

Debtor **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**

Case number (if known)

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.5. Does v. Diocese of Great Falls, et al. Adversary 11-1078	Tort - Sexual Abuse	Montana Eighth Judicial District Cascade County 415 2nd Ave North Great Falls, MT 59401	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None
**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**
☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Various Gifts and Contributions See Exhibit 14	Charitable Gifts Within 2 Years	See Exhibit 14	\$16,300.00
Recipients relationship to debtor			

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**
☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss  If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Dates of loss	Value of property lost
Chancery Office Roof Hail/Wind Damage	Claim Pending	08/18/2016	Unknown
Mount Olivet Cemetery Building Hail Damage	Claim Pending	08/18/2016	Unknown
Mount Olivet Cemetery Building Wind Damage	Claim Pending	09/01/2016	Unknown
Sacred Heart Renewal Center Hail/Wind Damage to Roof	\$15,897.13	05/21/2016	\$18,397.13
Villa Apartments Water/Freezing Damage	\$32,278.88	01/04/2016	\$34,778.88
Stites Memorial Complex Hail/Wind Damage to Buildings	Estimated \$130,000.00, Claim Pending	08/23/2014	\$132,500.00



Debtor **Roman Catholic Bishop of Great Falls, Montana, a Montana  
Religious Corporate Sole**

Case number (if known)

Description of the property lost and how the loss occurred	Amount of payments received for the loss  If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.  List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Dates of loss	Value of property lost
<b>Regina Cleric Hail/Wind Damage to Building</b>	<b>Estimated \$64,500, Claim Pending</b>		<b>\$67,000.00</b>
<b>Bishop Residence at Stites Complex Hail/Wind Damage to Building</b>	<b>Claim Pending</b>	<b>08/18/2016</b>	<b>\$20,400.00</b>

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.  <b>Elsaesser Jarzabek Anderson 320 East Neider Avenue Suite 102 Coeur d'Alene, ID 83815</b>		<b>7/31/2015 - \$2,925.00 10/26/2016 - \$5,000.00 2/17/2017 - \$28,998.37 3/28/17 - \$85,092.53</b>	<b>\$122,015.90</b>
<b>Email or website address</b>			
<b>Who made the payment, if not debtor?</b>			
11.2.  <b>Pachulski, Stang, Ziehl 10100 Santa Monica Blvd. 13th Floor Los Angeles, CA 90067-4003</b>		<b>3/2/17 \$35,000.00 3/24/17 \$22,180.04 3/31/17 \$45,000.00 - See Attached Exhibit 14</b>	<b>\$102,180.04</b>
<b>Email or website address</b>			
<b>Who made the payment, if not debtor?</b>			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.  
Do not include transfers already listed on this statement.

Debtor **Roman Catholic Bishop of Great Falls, Montana, a Montana  
Religious Corporate Sole**

Case number (if known)

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1	<b>John and Karen Switzer 34 Yellowstone Billings, MT 59101</b>	<b>Unused Residence Owned by RCB 34 Yellowstone Billings, MT 59101</b>	<b>05/2016</b>	<b>\$386,100.00</b>
	<b>Relationship to debtor</b>			
13.2	<b>State of Montana Dept of Transportation PO Box 201001 Helena, MT 59620</b>	<b>Road Easement Property Intersection of 26th St S and 24th Ave S Great Falls, MT</b>	<b>01/2016</b>	<b>\$37,550.00</b>
	<b>Relationship to debtor</b>			
13.3	<b>Fr. Navil c/o Diocese of Great Falls-Billings</b>	<b>Formerly Leased Vehicle Transferred to the Lessee Priest 2006 Toyota Rav4</b>	<b>06/2016</b>	<b>\$0.00</b>
	<b>Relationship to debtor</b>			
13.4	<b>Fr. Felix c/o Diocese of Great Falls-Billings</b>	<b>Formerly Leased Vehicle Transferred to the Lessee Priest 2007 Toyota Rav4</b>	<b>06/2016</b>	<b>\$0.00</b>
	<b>Relationship to debtor</b>			
13.5	<b>Fr. Xavier c/o Diocese of Great Falls-Billings</b>	<b>Formerly Leased Vehicle Transferred to the Lessee Priest 2008 Toyota Rav4</b>	<b>06/2016</b>	<b>\$0.00</b>
	<b>Relationship to debtor</b>			
13.6	<b>Fr. Martin c/o Diocese of Great Falls-Billings</b>	<b>Formerly Leased Vehicle Transferred to the Lessee Priest 2010 Ford Escape</b>	<b>06/2016</b>	<b>\$0.00</b>
	<b>Relationship to debtor</b>			

Debtor **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**

Case number (if known)

	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.7	Fr. Jose c/o Great Falls-Billings	Formerly Leased Vehicle Transferred to the Lessee Priest 2012 Ford Escape	06/2016	\$0.00
	Relationship to debtor			
13.8	Fr. D'Souza c/o Diocese of Great Falls-Billings	Formerly Leased Vehicle Transferred to the Lessee Priest 2006 Mercury Milan	08/2016	\$0.00
	Relationship to debtor			

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address

Dates of occupancy  
From-To**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services  
the debtor providesIf debtor provides meals  
and housing, number of  
patients in debtor's care**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**☒ No.☐ Yes. State the nature of the information collected and retained.**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**☐ No. Go to Part 10.☒ Yes. Does the debtor serve as plan administrator?☐ No Go to Part 10.☒ Yes. Fill in below:

Name of plan

**Clerical Benefit Association Retirement Fund**

Employer identification number of the plan

EIN: **Debtor Serves as Administrator**

Has the plan been terminated?

☒ No☐ Yes

Debtor **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**

Case number (if known)

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	<b>First Interstate Bank 2601 10th Ave S Great Falls, MT 59405</b>	<b>XXXX-9405</b>	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	<b>04/28/2016</b>	<b>\$165.64</b>
18.2.	<b>RBC Wealth Management P.O. Box 3069 Great Falls, MT 59403</b>	<b>XXXX-3491</b>	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input checked="" type="checkbox"/> Brokerage <input type="checkbox"/> Other___	<b>3/24/2017</b>	<b>\$151,090.91</b>

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
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**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Describe the property	Value
<b>Diocese of Great Falls-Billings 121 23rd St S Great Falls, MT 59401</b>		<b>Various cash accounts, see Exhibit 1</b>	<b>\$2,508,089.29</b>

Debtor **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**

Case number (if known)

Owner's name and address	Location of the property	Describe the property	Value
Diocese of Great Falls-Billings 121 23rd St S Great Falls, MT 59401		Various investment accounts, see Exhibit 3	\$15,004,708.29

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.**Report all notices, releases, and proceedings known, regardless of when they occurred.****22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

- ☐ No.
- ☒ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
Holy Cross Cemetery c/o Great Falls Diocese YE-21-16-C	Yellowstone Conservation District 1371 Rimtop Drive Billings, MT 59105	Dumping of Topsoil	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice

**Part 13: Details About the Debtor's Business or Connections to Any Business****25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Dates business existed

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Debtor **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**

Case number (if known)

Name and address		Date of service From-To
26a.1.	<b>Richard Moog 121 23rd St S Great Falls, MT 59401</b>	<b>02/2015 - Present</b>
26a.2.	<b>Susan Jordan 121 23rd St S Great Falls, MT 59401</b>	<b>02/2015 - Present</b>
26a.3.	<b>Shelly Suek 121 23rd St S Great Falls, MT 59401</b>	<b>02/2015 - Present</b>
26a.4.	<b>Joan Drevecky 121 23rd St S Great Falls, MT 59401</b>	<b>02/2015 - Present</b>
26a.5.	<b>Shanny Murphy 121 23rd St S Great Falls, MT 59401</b>	<b>02/2015 - Present</b>

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address		Date of service From-To
26b.1.	<b>Douglas Wilson and Company Jerry Schmitz, CPA 1000 1st Ave S Great Falls, MT 59401</b>	<b>02/2015 - Present</b>
26b.2.	<b>Richard Moog 121 23rd St S Great Falls, MT 59401</b>	<b>02/2015 - Present</b>

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address		If any books of account and records are unavailable, explain why
26c.1.	<b>Richard Moog 121 23rd St S Great Falls, MT 59401</b>	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address	
26d.1.	<b>Financial Statements Available to Public on Website <a href="http://www.diocesegfb.org">www.diocesegfb.org</a></b>

## 27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

Debtor **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole**

Case number (if known)

- ☒ No
- ☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
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28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Michael Warfel	121 23rd St S Great Falls, MT 59401	Bishop	
Jay Peterson	121 23rd St S Great Falls, MT 59401	Vicar General	
Darren Eultgen	121 23rd St S Great Falls, MT 59401	Chancellor	
Richard Moog	121 23rd St S Great Falls, MT 59401	Diocesan Finance Officer	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
- ☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
- ☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 Michael Warfel 121 23rd St S Great Falls, MT 59401	\$31,467.00 Salary	Fiscal Year 2017	
Relationship to debtor Bishop			
30.2 Jay Peterson 121 23rd St S Great Falls, MT 59401	\$31,628 Salary	Fiscal Year 2017	
Relationship to debtor Vicar General			

Debtor **Roman Catholic Bishop of Great Falls, Montana, a Montana  
Religious Corporate Sole**

Case number (if known)

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.3	<b>Darren Eultgen</b> <b>121 23rd St S</b> <b>Great Falls, MT 59401</b>	<b>\$66,040.00</b> <b>Salary</b>	<b>Fiscal Year</b> <b>2017</b>	
	<b>Relationship to debtor</b> <b>Chancellor</b>			
30.4	<b>Richard Moog</b> <b>121 23rd St S</b> <b>Great Falls, MT 59401</b>	<b>\$92,269.00</b> <b>Salary</b>	<b>Fiscal Year</b> <b>2017</b>	
	<b>Relationship to debtor</b> <b>Financial Officer</b>			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **March 31, 2017****/s/ Michael W. Warfel**

Signature of individual signing on behalf of the debtor

**Michael W. Warfel**

Printed name

Position or relationship to debtor **Bishop**Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No  
☐ Yes



B2030 (Form 2030) (12/15)

**United States Bankruptcy Court  
District of Montana**

In re **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious  
Corporate Sole**

Debtor(s)

Case No.

Chapter **11**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
 

For legal services, I have agreed to accept .....	\$	<u><b>122,015.90</b></u>
Prior to the filing of this statement I have received .....	\$	<u><b>122,015.90</b></u>
Balance Due .....	\$	<u><b>0.00</b></u>
2. \$ **1,717.00** of the filing fee has been paid.
3. The source of the compensation paid to me was:
 

☒ Debtor      ☐ Other (specify):
4. The source of compensation to be paid to me is:
 

☒ Debtor      ☐ Other (specify):
5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
  - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - b. [Other provisions as needed]

**Pre-filing preparation and filing of petition, schedules and statement of financial affairs which may be required.**
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
 

**Any post-petition work.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**March 31, 2017**

*Date*

**/s/ Bruce A. Anderson**

**Bruce A. Anderson 3392**

*Signature of Attorney*

**Elsaesser Jarzabek Anderson Elliott & Macdonald,  
Chtd.**

**320 East Neider Avenue**

**Suite 102**

**Coeur D Alene, ID 83815**

**(208) 667-2900 Fax: (208) 667-2150**

**brucea@ejame.com**

*Name of law firm*

**United States Bankruptcy Court  
District of Montana**

In re **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious  
Corporate Sole**

Debtor(s)

Case No.

Chapter

**11**

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
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**-NONE-**

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **Bishop** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **March 31, 2017**

Signature **/s/ Michael W. Warfel  
Michael W. Warfel**

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court  
District of Montana**

In re **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious  
Corporate Sole**

Debtor(s)

Case No.  
Chapter

**11**

**VERIFICATION OF CREDITOR MATRIX**

I, the Bishop of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **March 31, 2017**

**/s/ Michael W. Warfel**

**Michael W. Warfel/Bishop**

Signer/Title

Roman Catholic Bishop of Great Falls, Montana P.O. Box 1399 Great Falls, MT 59403	General Unincorporated Religious Corporate All in Care-Diocese of Great Falls 121 23rd St S Great Falls, MT 59401	Mary Queen of Peace 3411 S 34th St Billings, MT 59101
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Bruce A. Anderson Elsaesser Jarzabek Anderson Elliott & Macdonald 320 East Neider Avenue Suite 102 Coeur D Alene, ID 83815	Holy Family 530 Main St. Winifred, MT 59489	Our Lady of Loretto Parish 11723 E Helen St Lodge Grass, MT 59050
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34 Abuse Claimants "Doe Group" Bryan Smith and Vito de la Cruz Tamaki Law Offices 1340 N. 16th Avenue, Suite C Yakima, WA 98902	Holy Family 102 1st Ave N Glentana, MT 59240	Our Lady of Lourdes 409 13th St S Great Falls, MT 59405
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38 Abuse Claimants "Becker Group" Timothy Kosnoff, Kosnoff Law Metro Office Park, Metro Park 7 Street 1, Suite 204 Guyanabo San Juan, PR 00968	Holy Spirit Church 201 44th St S Great Falls, MT 59405	Our Lady of Lourdes Parish 105 F St W Poplar, MT 59255
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Blessed Sacrament Parish 630 Cheyenne Ave Lame Deer, MT 59043	Holy Trinity Church 692 Stockett Rd Centerville, MT 59480	Our Lady Of Mercy Mission 121 6th Ave W Melstone, MT 59054
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Catholic Foundation of Eastern MT P.O. Box 1345 Great Falls, MT 59403-1345	Immaculate Conception Parish 513 Dawson St Wolf Point, MT 59201	Our Lady of Ransom 201 2nd St Hingham, MT 59528
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Christ the King 13268 S 5TH St Busby, MT 59016	Immaculate Conception Parish 509 N 12th Ave Forsyth, MT 59327	Queen of the Angels 206 Hobart Nashua, MT 59248
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Corpus Christi Parish 410 22nd Ave NE Great Falls, MT 59404	Immaculate Conception Parish 1223 16th St Fort Benton, MT 59442	Sacred Heart P.O. Box 236 Fort Belknap, MT 59526
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First Lease, Inc. 1 Walnut Grove Dr Suite 300 Horsham, PA 19044	Marlin Leasing Corporation 300 Fellowship Rd Mount Laurel, NJ 08054	Sacred Heart Mission 22 2nd St NW Cascade, MT 59421
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Sacred Heart Mission  
314 Clinton St  
Bainville, MT 59212

SS Cyril and Methodius  
16 South Corner Rd  
Ballantine, MT 59006

St Philip Bonitus Parish  
404 Timmons St  
Scobey, MT 59263

Sacred Heart Mission  
630 Main Ave  
Inverness, MT 59530

St Aloysius Parish  
112 W Main St  
Winnett, MT 59087

St. Agnes Parish  
1 N Word Ave  
Red Lodge, MT 59068

Sacred Heart Mission  
100 2nd Ave E  
Hobson, MT 59452

St David Parish  
225 N Wilber St  
Broadus, MT 59317

St. Albert  
304 Minnesota  
Hinsdale, MT 59241

Sacred Heart Mission  
225 2nd Ave E  
Dodson, MT 59524

St Francis De Sales Mission  
301 S Main St  
Richey, MT 59259

St. Ann Cathedral  
715 3rd Ave N  
Great Falls, MT 59401

Sacred Heart Parish  
209 S 4th St  
Bridger, MT 59014

St Francis Of Assisi Parish  
500 Wilson Ave  
Saco, MT 59261

St. Ann Mission  
13327 Mt Highway 200  
Fort Shaw, MT 59443

Sacred Heart Parish  
120 N Montana Ave  
Miles City, MT 59301

St John The Evangelist Parish  
210 W Center Ave  
Baker, MT 59313

St. Ann Mission  
102 Shell St  
Vida, MT 59274

Sacred Heart Parish  
316 W Benham St  
Glendive, MT 59330

St Margaret Parish  
623 Brewster St  
Geraldine, MT 59446

St. Anthony Catholic Church  
235 Main St E  
Box Elder, MT 59521

Sacred Heart Parish  
302 S McDonald Ave  
Terry, MT 59349

St Mary Parish  
101 S 7th St W  
Malta, MT 59538

St. Anthony Mission  
1100 Main St  
Denton, MT 59430

Saint Kateri Tekakwitha  
41546 Mondel Ave  
Wyola, MT 59089

St Mathias Parish  
310 2nd St NE  
Moore, MT 59464

St. Anthony Parish  
413 3rd Ave W  
Culbertson, MT 59218

St. Anthony Parish  
700 Third Ave  
Laurel, MT 59044

St. Gabriel Parish  
404 8th St W  
Chinook, MT 59523

St. Joseph Parish  
301 N Main St  
Plentywood, MT 59254

St. Benedict Parish  
503 Main St  
Roundup, MT 59072

St. Honorata Mission  
22 3rd Ave  
Musselshell, MT 59059

St. Joseph Parish  
910 McLeod St  
Big Timber, MT 59011

St. Bernard Mission  
301 Road 148  
Charlie Creek, MT 59270

St. Joan of Arc Parish  
100 Church Ave  
Ekalaka, MT 59324

St. Jude Thaddeus Parish  
624 4th St  
Havre, MT 59501

St. Bernard's Parish  
226 Wicks Lane  
Billings, MT 59105

St. John Church  
404 W Central St  
Joliet, MT 59041

St. Labre Parish  
Tongue River Road  
Ashland, MT 59003

St. Catherine Mission  
317 7th St W  
Fairview, MT 59221

St. John the Baptist  
412 Leavitt Ave  
Jordan, MT 59337

St. Leo the Great Parish  
102 W Broadway St  
Lewistown, MT 59457

St. Charles Borromeo Mission  
21228 S Pryor Gap Road  
Pryor, MT 59066

St. Joseph  
206 Orchard Ave  
Hysham, MT 59038

St. Margaret Mary Parish  
400 Johannes  
Big Sandy, MT 59520

St. Cyril Parish  
100 Hill Ave  
Geyser, MT 59447

St. Joseph  
331 Moccasin  
Frazer, MT 59225

St. Margaret Mary Parish  
320 Water Ave  
Colstrip, MT 59323

St. Dennis Parish  
76 Highway 1  
Crow Agency, MT 59022

St. Joseph Mission  
202 N Montana St  
Fromberg, MT 59029

St. Margaret Parish  
206 1st Ave N  
Clyde Park, MT 59018

St. Francis Xavier Parish  
1100 C Ave  
Circle, MT 59215

St. Joseph Parish  
716 N Custer Ave  
Hardin, MT 59034

St. Mark Parish  
128 Castner St  
Belt, MT 59412

St. Mary  
212 4th Ave  
Custer, MT 59024

St. Patrick  
401 Main St  
Medicine Lake, MT 59247

St. Theresa of the Little Flower  
16638 Iowa  
Broadview, MT 59015

St. Mary Catholic Church  
11 W Quincy Ave  
Chester, MT 59522

St. Patrick Co Cathedral  
215 N 31st  
Billings, MT 59101

St. Thomas Aquinas  
10610 Wing Rd  
Hogeland, MT 59529

St. Mary Mission  
100 Main St  
Raynesford, MT 59469

St. Paul Indian Mission  
#1 Mission Dr  
Hays, MT 59527

St. Thomas Mission  
201 W Conser Ave  
Plevna, MT 59344

St. Mary Parish  
511 S F St  
Livingston, MT 59047

St. Peter  
312 W 1st Ave S  
Wibaux, MT 59353

St. Thomas Mission  
3022 BIA Road 173  
Brockton, MT 59213

St. Mary Parish  
240 N Fourth St  
Columbus, MT 59019

St. Philip  
61 Lamesteer Rd  
Wibaux, MT 59353

St. Thomas the Apostle  
210 1st Ave SE  
Harlem, MT 59526

St. Mathias  
305 Kemp St  
Ryegate, MT 59074

St. Pius X Catholic Church  
717 18th St W  
Billings, MT 59102

St. Thomas The Apostle  
2055 Woody Dr  
Billings, MT 59102

St. Matthew Parish  
219 7th St SE  
Sidney, MT 59270-5034

St. Raphael Parish  
412 3rd Ave N  
Glasgow, MT 59230

St. William Mission  
705 Scott St W  
Gardiner, MT 59030

St. Michael  
307 S Woodard St  
Absarokee, MT 59001

St. Rose of Lima Church  
101 4th St W  
Stanford, MT 59479

Various Unexpired Leases  
See Exhibit 9

St. Michael Mission  
120 2nd Ave  
Savage, MT 59262

St. Theresa Mission  
212 N Main St  
Lambert, MT 59243

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Fasy Law  
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Seattle, WA 98107

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Philadelphia, PA 19101-7346

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James, Vernon and Weeks  
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Milt Datsopoulos and Molly Howard  
Datsopoulos, MacDonald & Lind  
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Suite 201  
Missoula, MT 59802

Montana Dept. of Revenue  
PO Box 7701  
Helena, MT 59604-7701

Schiff Harden  
Everett Cygal  
233 South Wacker, Ste. 6600  
Chicago, IL 60606



**United States Bankruptcy Court  
District of Montana**

In re **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious  
Corporate Sole**

Debtor(s)

Case No.

Chapter

**11**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Roman Catholic Bishop of Great Falls, Montana, a Montana Religious Corporate Sole** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [*Check if applicable*]

**March 31, 2017**

Date

**/s/ Bruce A. Anderson**

**Bruce A. Anderson 3392**

Signature of Attorney or Litigant

Counsel for **Roman Catholic Bishop of Great Falls, Montana, a Montana  
Religious Corporate Sole**

**Elsaesser Jarzabek Anderson Elliott & Macdonald, Chtd.**

**320 East Neider Avenue**

**Suite 102**

**Coeur D Alene, ID 83815**

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